

20 15 CR 01

007480

ROBERT A. DWAN
BOSTON MUNICIPAL COURT-CENTRAL DIVISION

DOCKET ENTRIES	
Legal Counsel Fee Assessment	ATTORNEY
Legal Counsel Fee Contribution	HARRINGTON
Victim/Witness Fund Assessment	
Drug Analysis Fund Assessment	
Supervised Probation Fee	
NOV 04 2015	BAIL ON
SUMMONS TO ISSUE	
DEC - 1 2015	RETURNABLE <u>DEC 4 1106</u>
MOTION TO CONTINUE	SEE NO
ATTY HARRINGTON	15-7425-
Cape# <u>17</u> Defendant <u>Not In</u> / In Court	Atty <u>Present</u>
Footage <u>12:55</u> ADA <u>Nucci</u> APO <u>Common</u>	

Defendant Files Motion To Advance & Continue for Agreement

Court to December 22

Rm 17 Arraignment OS
Cyrus J

DEC 22 2015

12-22-15 John E. Ryan A.B. Clerk
D.C. Atty. Harrington for deft. Lt. Det. Hamilton present
Withdrawn at the request of Lt. Det. Hamilton.
D Lt Det Cal

12/15/15 Upon request of BPD and Suffolk DA's of
matter is marked up for hearing to determine
probable cause. The BPD requests that their
request for process was for a hearing and
a summons for arraignment. All parties are in
of for the purpose of advising all parties of

BOSTON MUNICIPAL COURT-CENTRAL DIVISION

DOCKET ENTRIES

This case. All parties agree to schedule the matter for a hearing on 12/22/15 to determine if probable cause exists to issue process. ADA Branch given several opportunities to appear and object but advised SLT Hamilton that she was aware of all the circumstances surrounding this case, did not object to a hearing on probable cause and did not wish to appear and be heard on any issues surrounding this application for complaint.

DJH

December 22, 2015

To whom it may concern,

I wish to withdraw the complaints issued in the following cases:

2015CR 01007475

2015CR 01007476

2015CR 01007477

2015CR 01007478

2015Cr 01007479

2015CR 01007480

Respectfully submitted,

A handwritten signature in dark ink, appearing to be 'CH' followed by a long horizontal stroke.

Lieutenant Detective Christopher Hamilton

Commander, Boston Police Department Anti-Corruption Division

APPLICATION FOR CRIMINAL COMPLAINT		APPLICATION NO. (COURT USE ONLY)	PAGE 1 of 2	Trial Court of Massachusetts District Court Department Boston Municipal Court 24 New Chardon Street Boston, Ma. 02114	
<p>I, the undersigned complainant, request that a criminal complaint issue against the accused charging the offense(s) listed below. If the accused HAS NOT BEEN ARRESTED and the charges involve:</p> <p><input type="checkbox"/> ONLY MISDEMEANOR(S), I request a hearing <input type="checkbox"/> WITHOUT NOTICE because of an imminent threat of <input type="checkbox"/> BODILY INJURY <input type="checkbox"/> COMMISSION OF A CRIME <input type="checkbox"/> FLIGHT <input type="checkbox"/> WITH NOTICE to accused. <input checked="" type="checkbox"/> ONE OR MORE FELONIES, I request a hearing <input checked="" type="checkbox"/> WITHOUT NOTICE <input type="checkbox"/> WITH NOTICE to accused.</p> <p><input type="checkbox"/> WARRANT is requested because prosecutor represents that accused may not appear unless arrested</p>				ARREST STATUS OF ACCUSED <input type="checkbox"/> HAS <input checked="" type="checkbox"/> HAS NOT been arrested	
INFORMATION ABOUT ACCUSED					
NAME (FIRST MI LAST) AND ADDRESS Robert A. Dwan [REDACTED]		BIRTH DATE [REDACTED]		SOCIAL SECURITY NUMBER [REDACTED]	
		PCF NUMBER		MARITAL STATUS Married	
		DRIVERS LICENSE NUMBER [REDACTED]		STATE Ma.	
		GENDER M	HEIGHT 5' 03"	WEIGHT 160	EYES Blue
HAIR Brown	RACE W/N	COMPLEXION Light	SCARS/MARKS/TATTOOS		BIRTH STATE OR COUNTRY Massachusetts
EMPLOYER/SCHOOL City Of Boston		MOTHER'S MAIDEN NAME (FIRST MI LAST) [REDACTED]		FATHER'S NAME (FIRST MI LAST) [REDACTED]	
COMPLAINANT NAME (FIRST MI LAST) Lt Detective Christopher Hamilton		COMPLAINANT TYPE <input checked="" type="checkbox"/> POLICE <input type="checkbox"/> CITIZEN <input type="checkbox"/> OTHER		PD BOSTON	
ADDRESS 1 Schroeder Plaza Boston, Ma. 02120		PLACE OF OFFENSE 650 Harrison Ave, Boston, Ma.			
		INCIDENT REPORT NO. 152091275		OBTN	
		CITATION NO(S).			
1	OFFENSE CODE C266, S30	DESCRIPTION Larceny Over \$250.00		OFFENSE DATE 8/9/2015	
VARIABLES (e.g. victim name, controlled substances, type and value of property, other variable information: see Complaint Language Manual) City Of Boston, Three Hundred Forty One Dollars And Seventy Cents					
2	OFFENSE CODE	DESCRIPTION		OFFENSE DATE	
VARIABLES					
3	OFFENSE CODE	DESCRIPTION		OFFENSE DATE	
VARIABLES					
REMARKS		COMPLAINANT'S SIGNATURE X [Signature]		DATE FILED 11/04/2015	
COURT USE ONLY →		A HEARING UPON THIS COMPLAINT APPLICATION WILL BE HELD AT THE ABOVE COURT ADDRESS ON		COURT USE ONLY ←	
DATE		PROCESSING OF NON-ARREST APPLICATION (COURT USE ONLY)			CLERK/JUDGE
		NOTICE SENT OF CLERK'S HEARING SCHEDULED ON:			
		NOTICE SENT OF JUDGE'S HEARING SCHEDULED ON:			
		HEARING CONTINUED TO:			
		APPLICATION DECIDED WITHOUT NOTICE TO ACCUSED BECAUSE: <input type="checkbox"/> IMMINENT THREAT OF <input type="checkbox"/> BODILY INJURY <input type="checkbox"/> CRIME <input type="checkbox"/> FLIGHT BY ACCUSED <input type="checkbox"/> FELONY CHARGED AND POLICE DO NOT REQUEST NOTICE <input type="checkbox"/> FELONY CHARGED BY CIVILIAN: NO NOTICE AT CLERK'S DISCRETION			
DATE		COMPLAINT TO ISSUE		COMPLAINT DENIED	
		<input type="checkbox"/> PROBABLE CAUSE FOUND FOR ABOVE OFFENSE(S) NO(S), <input type="checkbox"/> 1. <input type="checkbox"/> 2. <input type="checkbox"/> 3. BASED ON <input type="checkbox"/> FACTS SET FORTH IN ATTACHED STATEMENT(S) <input type="checkbox"/> TESTIMONY RECORDED: TAPE NO. _____ START NO. _____ END NO. _____ <input type="checkbox"/> WARRANT <input type="checkbox"/> SUMMONS TO ISSUE ARRAIGNMENT DATE:		<input type="checkbox"/> NO PROBABLE CAUSE FOUND <input type="checkbox"/> REQUEST OF COMPLAINANT <input type="checkbox"/> FAILURE TO PROSECUTE <input type="checkbox"/> ON AGREEMENT OF BOTH PARTIES <input type="checkbox"/> OTHER: COMMENT:	

20 15 CR 01

007479

BOSTON ROBERT A. DWAN CENTRAL DIVISION

DOCKET ENTRIES

Legal Counsel Fee Assessment

Legal Counsel Fee Contribution

Victim/Witness Fund Assessment

Drug Analysis Fund Assessment

Supervised Probation Fee

ATTORNEY

HARRINGTON

NOV 04 2015

SUMMONS TO ISSUE

BAIL ONLY

DEC - 1 2015

RETURNABLE

DEC 4

Nov 7

MOTION TO CONTINUE by

ATTY HARRINGTON

Caption

17

Defendant Not In Court

Atty Harrington Present

SEE NO.

15 7475

7480

7476

7477

7478

Footage 12:33 ADA NUCC

APO Common

Defendant Files Motion To Advance & Continue to Agreement

Cont to December 22

Rm 17 Arraignment

002

Cupre 9

DEC 22 2015

12-22-15 John E. Ryan Atty. Clerk.

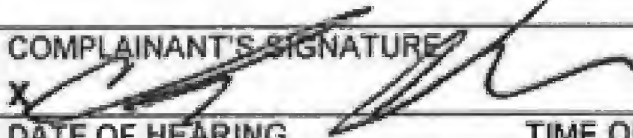
DLC. Atty Harrington for def. Lt. Det. Hamilton present

Withdrawn at the request of Lt. Det. Hamilton.

Lt Det Chris B.

12/22/15 See record on 15-7480

JTH

APPLICATION FOR CRIMINAL COMPLAINT		APPLICATION NO. (COURT USE ONLY)		PAGE 1 of 2		Trial Court of Massachusetts District Court Department Boston Municipal Court 24 new Chardon Street Boston., Ma. 02114	
<p>I, the undersigned complainant, request that a criminal complaint issue against the accused charging the offense(s) listed below. If the accused HAS NOT BEEN ARRESTED and the charges involve:</p> <p><input type="checkbox"/> ONLY MISDEMEANOR(S), I request a hearing <input type="checkbox"/> WITHOUT NOTICE because of an imminent threat of <input type="checkbox"/> BODILY INJURY <input type="checkbox"/> COMMISSION OF A CRIME <input type="checkbox"/> FLIGHT <input type="checkbox"/> WITH NOTICE to accused. <input checked="" type="checkbox"/> ONE OR MORE FELONIES, I request a hearing <input checked="" type="checkbox"/> WITHOUT NOTICE <input type="checkbox"/> WITH NOTICE to accused.</p> <p><input type="checkbox"/> WARRANT is requested because prosecutor represents that accused may not appear unless arrested</p>						ARREST STATUS OF ACCUSED <input type="checkbox"/> HAS <input checked="" type="checkbox"/> HAS NOT been arrested	
INFORMATION ABOUT ACCUSED							
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				PCF NUMBER		MARITAL STATUS Married	
				DRIVERS LICENSE NUMBER [REDACTED]		STATE Ma.	
				GENDER M	HEIGHT 5' 03"	WEIGHT 160	EYES Blue
HAIR Brown	RACE W/N	COMPLEXION Light	SCARS/MARKS/TATTOOS		BIRTH STATE OR COUNTRY Massachusetts		DAY PHONE
EMPLOYER/SCHOOL City Of Boston		MOTHER'S MAIDEN NAME (FIRST MI LAST) [REDACTED]				FATHER'S NAME (FIRST MI LAST) [REDACTED]	
CASE INFORMATION							
COMPLAINANT NAME (FIRST MI LAST) Lt Detective Christopher Hamilton				COMPLAINANT TYPE <input checked="" type="checkbox"/> POLICE <input type="checkbox"/> CITIZEN <input type="checkbox"/> OTHER		PD BOSTON	
ADDRESS 1 Schroeder Plaza Boston, Ma. 02120				PLACE OF OFFENSE 650 Harrison Ave, Boston, Ma.			
				INCIDENT REPORT NO. 152091276		OBTN	
				CITATION NO(S).			
1	OFFENSE CODE C266, S30	DESCRIPTION Larceny Over \$250.00				OFFENSE DATE 8/17/2015	
	VARIABLES (e.g. victim name, controlled substances, type and value of property, other variable information: see Complaint Language Manual) City Of Boston, Four Hundred Ninety Five Dollars						
2	OFFENSE CODE	DESCRIPTION				OFFENSE DATE	
	VARIABLES						
3	OFFENSE CODE	DESCRIPTION				OFFENSE DATE	
	VARIABLES						
REMARKS				COMPLAINANT'S SIGNATURE 		DATE FILED 11/04/2015	
COURT USE ONLY →		A HEARING UPON THIS COMPLAINT APPLICATION } WILL BE HELD AT THE ABOVE COURT ADDRESS ON				DATE OF HEARING AT TIME OF HEARING ← COURT USE ONLY	
DATE		PROCESSING OF NON-ARREST APPLICATION (COURT USE ONLY)					CLERK/JUDGE
		NOTICE SENT OF CLERK'S HEARING SCHEDULED ON:					
		NOTICE SENT OF JUDGE'S HEARING SCHEDULED ON:					
		HEARING CONTINUED TO:					
		APPLICATION DECIDED WITHOUT NOTICE TO ACCUSED BECAUSE: <input type="checkbox"/> IMMINENT THREAT OF <input type="checkbox"/> BODILY INJURY <input type="checkbox"/> CRIME <input type="checkbox"/> FLIGHT BY ACCUSED <input type="checkbox"/> FELONY CHARGED AND POLICE DO NOT REQUEST NOTICE <input type="checkbox"/> FELONY CHARGED BY CIVILIAN: NO NOTICE AT CLERK'S DISCRETION					
DATE		COMPLAINT TO ISSUE			COMPLAINT DENIED		CLERK/JUDGE
Nov 4 2015		<input type="checkbox"/> PROBABLE CAUSE FOUND FOR ABOVE OFFENSE(S) NO(S), <input type="checkbox"/> 1. <input type="checkbox"/> 2. <input type="checkbox"/> 3. BASED ON <input type="checkbox"/> FACTS SET FORTH IN ATTACHED STATEMENT(S) <input type="checkbox"/> TESTIMONY RECORDED: TAPE NO. _____ START NO. _____ END NO. _____ <input type="checkbox"/> WARRANT <input type="checkbox"/> SUMMONS TO ISSUE ARRAIGNMENT DATE:			<input type="checkbox"/> NO PROBABLE CAUSE FOUND <input type="checkbox"/> REQUEST OF COMPLAINANT <input type="checkbox"/> FAILURE TO PROSECUTE <input type="checkbox"/> ON AGREEMENT OF BOTH PARTIES <input type="checkbox"/> OTHER: COMMENT:		
		[REDACTED]			[REDACTED]		
<p><i>DNIC</i> <i>Officer Hamilton</i> <i>Approved</i> <i>11/04/2015</i> <i>Therese Allowed</i></p>							

BOSTON MUNICIPAL COURT CENTRAL DIVISION

ROBERT A. DWAN

DOCKET ENTRIES

Legal Counsel Fee Assessment

Legal Counsel Fee Contribution

Victim/Witness Fund Assessment

Drug Analysis Fund Assessment

Supervised Probation Fee

NOV 04 2015

SUMMONS TO ISSUE

RETURNABLE DEC 4

DEC - 1 2015

PM 7

HARRIS

MOTION TO CONTINUE by

ATTY HARRIS

Case# 17 Defendant (Not In) In Court Atty Harrington Present

Footage 12:55 ADA NUCCI APO Connors

Defendant Files Motion To Advance & Confirm to Agreement

Cont to December 22

Rm 17 Arraignment

Cayne D

DEC 22 2015

12-22-15 John E. Ryan Atty. Clerk

SIC. Atty. Harrington for Def. Lt. Det. Hamilton pr

Withdrawn at the request of Lt. Det. Hamilton.
At Det John Ryan

12/22/15 See record on 15-7480

DTA

ATTORNEY

HARRIS

BAIL ONLY

SEE NO

15-747

7476

7479

7480

APPLICATION FOR CRIMINAL COMPLAINT		APPLICATION NO. (COURT USE ONLY)	PAGE 1 of 2	Trial Court of Massachusetts District Court Department Boston Municipal Court 24 New Chardon Street Boston, Ma. 02114		
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INFORMATION ABOUT ACCUSED						
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			PCF NUMBER		MARITAL STATUS Married	
			DRIVERS LICENSE NUMBER [REDACTED]		STATE Ma.	
			GENDER M	HEIGHT 5' 03"	WEIGHT 160	EYES Blue
HAIR Brown	RACE W/N	COMPLEXION Light	SCARS/MARKS/TATTOOS		BIRTH STATE OR COUNTRY Massachusetts	DAY PHONE
EMPLOYER/SCHOOL City Of Boston		MOTHER'S MAIDEN NAME (FIRST MI LAST) [REDACTED]		FATHER'S NAME (FIRST MI LAST) [REDACTED]		
CASE INFORMATION						
COMPLAINANT NAME (FIRST MI LAST) Lt Detective Christopher Hamilton			COMPLAINANT TYPE <input checked="" type="checkbox"/> POLICE <input type="checkbox"/> CITIZEN <input type="checkbox"/> OTHER		PD BOSTON	
ADDRESS 1 Schroeder Plaza Boston, Ma. 02120			PLACE OF OFFENSE 650 Harrison Ave, Boston, Ma.			
			INCIDENT REPORT NO. 152091277		OBTN	
			CITATION NO(S).			
1	OFFENSE CODE C266, S30	DESCRIPTION Larceny Over \$250.00			OFFENSE DATE 8/22/2015	
	VARIABLES (e.g. victim name, controlled substances, type and value of property, other variable information: see Complaint Language Manual) City Of Boston, Three Hundred Twenty Five Dollars And Sixteen Cents					
2	OFFENSE CODE	DESCRIPTION			OFFENSE DATE	
	VARIABLES					
3	OFFENSE CODE	DESCRIPTION			OFFENSE DATE	
	VARIABLES					
REMARKS			COMPLAINANT'S SIGNATURE X [Signature]		DATE FILED 11/4/2015	
COURT USE ONLY →			A HEARING UPON THIS COMPLAINT APPLICATION } WILL BE HELD AT THE ABOVE COURT ADDRESS ON		DATE OF HEARING AT TIME OF HEARING ← COURT USE ONLY	
DATE			PROCESSING OF NON-ARREST APPLICATION (COURT USE ONLY)		CLERK/JUDGE	
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			NOTICE SENT OF JUDGE'S HEARING SCHEDULED ON:			
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DNIC *Officer Martin Appointed Testifies*
Allowed 1 - Nov 4 2015 *Mark J. Leonard*

20 15 CR 01

007477

BOSTON

ROBERT A. DWAN

CENTRAL DIVISION

DOCKET ENTRIES

Legal Counsel Fee Assessment

Legal Counsel Fee Contribution

Victim/Witness Fund Assessment

Drug Analysis Fund Assessment

Supervised Probation Fee

NOV 4 2015

ATTORNEY

HARRIS.

BAIL ONLY

SUMMONS TO ISSU.

RETURNABLE DEC 4

DEC - 1 2015

MOTION to CONTINUE by [unclear]

Atty Harrington

Tape# 17 Defendant Not In / In Court Atty Harrington Present

Footage 12:55 ADA NUCCI APO Common

SEE NO

15-7478

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7480

Defendant Files Motion To Advance & Continue by Agreement

Cont to December 22

Run 17 Arraignment

Cupel

DEC 2 2 2015

12-22-15 John E. Ryan Atty. Clerk

Atty. Harrington for Lt. Lt. Atty. Hamilton present

Withdrawn at the request of Lt. Atty. Hamilton.

By Det. [unclear]

12/22/15 See record on 15-7480

DTH

APPLICATION FOR CRIMINAL COMPLAINT		APPLICATION NO. (COURT USE ONLY)	PAGE 1 of 2	Trial Court of Massachusetts District Court Department Boston Municipal Court 24 New Chardon Street Boston, Ma. 02114		
<p>I, the undersigned complainant, request that a criminal complaint issue against the accused charging the offense(s) listed below. If the accused HAS NOT BEEN ARRESTED and the charges involve:</p> <p><input type="checkbox"/> ONLY MISDEMEANOR(S), I request a hearing <input type="checkbox"/> WITHOUT NOTICE because of an imminent threat of <input type="checkbox"/> BODILY INJURY <input type="checkbox"/> COMMISSION OF A CRIME <input type="checkbox"/> FLIGHT <input type="checkbox"/> WITH NOTICE to accused.</p> <p><input checked="" type="checkbox"/> ONE OR MORE FELONIES, I request a hearing <input checked="" type="checkbox"/> WITHOUT NOTICE <input type="checkbox"/> WITH NOTICE to accused.</p> <p><input type="checkbox"/> WARRANT is requested because prosecutor represents that accused may not appear unless arrested</p>				ARREST STATUS OF ACCUSED <input type="checkbox"/> HAS <input checked="" type="checkbox"/> HAS NOT been arrested		
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NAME (FIRST MI LAST) AND ADDRESS Robert A. Dwan [REDACTED]			BIRTH DATE [REDACTED]		SOCIAL SECURITY NUMBER [REDACTED]	
			PCF NUMBER		MARITAL STATUS Married	
			DRIVERS LICENSE NUMBER [REDACTED]		STATE Ma	
			GENDER M	HEIGHT 5' 03"	WEIGHT 160	EYES Blue
HAIR Brown	RACE W/N	COMPLEXION Light	SCARS/MARKS/TATTOOS		BIRTH STATE OR COUNTRY Massachusetts	DAY PHONE
EMPLOYER/SCHOOL City Of Boston		MOTHER'S MAIDEN NAME (FIRST MI LAST) [REDACTED]		FATHER'S NAME (FIRST MI LAST) [REDACTED]		
CASE INFORMATION						
COMPLAINANT NAME (FIRST MI LAST) Lt Detective Christopher Hamilton			COMPLAINANT TYPE <input checked="" type="checkbox"/> POLICE <input type="checkbox"/> CITIZEN <input type="checkbox"/> OTHER		PD BOSTON	
ADDRESS 1 Schroeder Plaza Boston, Ma. 02120			PLACE OF OFFENSE 650 Harrison Ave, Boston, Ma.			
			INCIDENT REPORT NO. 152091274		OBTN	
			CITATION NO(S).			
1	OFFENSE CODE C266, S30	DESCRIPTION Larceny Over \$250.00			OFFENSE DATE 6/30/2015	
VARIABLES (e.g. victim name, controlled substances, type and value of property, other variable information: see Complaint Language Manual) City Of Boston, Four Hundred Ninety Five Dollars						
2	OFFENSE CODE	DESCRIPTION			OFFENSE DATE	
VARIABLES						
3	OFFENSE CODE	DESCRIPTION			OFFENSE DATE	
VARIABLES						
REMARKS			COMPLAINANT'S SIGNATURE x [Signature]		DATE FILED 11/04/2015	
COURT USE ONLY →			DATE OF HEARING		COURT USE ONLY ←	
A HEARING UPON THIS COMPLAINT APPLICATION WILL BE HELD AT THE ABOVE COURT ADDRESS ON			AT TIME OF HEARING			
PROCESSING OF NON-ARREST APPLICATION (COURT USE ONLY)						
DATE			CLERK/JUDGE			
NOTICE SENT OF CLERK'S HEARING SCHEDULED ON:						
NOTICE SENT OF JUDGE'S HEARING SCHEDULED ON:						
HEARING CONTINUED TO:						
APPLICATION DECIDED WITHOUT NOTICE TO ACCUSED BECAUSE:						
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<input type="checkbox"/> FACTS SET FORTH IN ATTACHED STATEMENT(S)			<input type="checkbox"/> REQUEST OF COMPLAINANT			
<input type="checkbox"/> TESTIMONY RECORDED: TAPE NO. _____ START NO. _____ END NO. _____			<input type="checkbox"/> FAILURE TO PROSECUTE			
<input type="checkbox"/> WARRANT <input type="checkbox"/> SUMMONS TO ISSUE			<input type="checkbox"/> ON AGREEMENT OF BOTH PARTIES			
ARRAIGNMENT DATE:			COMMENT:			

*psd
4
2015*

*Officer MARRAS agrees to file allowed
J. Dec 4, 2015
MARRAS*

**STATEMENT OF FACTS
IN SUPPORT OF
APPLICATION FOR CRIMINAL COMPLAINT**

APPLICATION NO. (COURT USE ONLY)

PAGE

2 of 2

**Trial Court of Massachusetts
District Court Department**



The undersigned alleges the following as a ☐ full or ☒ partial statement of the factual basis for the offense(s) for which a criminal complaint is sought

COURT DIVISION

An investigation revealed that Robert Dwan submitted a voucher for payment for June 30, 2015 to the City of Boston in the amount of \$495 (four hundred ninety five dollars) for hours that he did not work.

(Use additional sheets if necessary)

PRINTED NAME
Christopher Hamilton

SIGNATURE

I AM A:

☒ LAW ENFORCEMENT OFFICER
☐ CIVILIAN COMPLAINANT OR WITNESS

DATE SIGNED
11/3/2015

ADDITIONAL FACTS BY CLERK-MAGISTRATE/ASST. CLERK/JUDGE BASED ON ORAL TESTIMONY

Blank area for additional facts by Clerk-Magistrate/Asst. Clerk/Judge based on oral testimony.

PRINTED NAME

SIGNATURE OF CLERK-MAGISTRATE/ASST. CLERK/JUDGE

X


DATE SIGNED

ROBERT A. DWAN
BOSTON MUNICIPAL COURT-CENTRAL DIVISION

DOCKET ENTRIES		ATTORNEY
Legal Counsel Fee Assessment		Harrington
Legal Counsel Fee Contribution		
Victim/Witness Fund Assessment		
Drug Analysis Fund Assessment		
Supervised Probation Fee		
<u>Nov 4 2015</u>	SUMMONS TO ISSUE	BAIL ONLY
<u>DEC - 1 2015</u>	RETURNABLE <u>DEC 4</u>	
	RETURNABLE <u>Nov 17</u>	
<u>MOTION TO CONTINUE</u>	<u>Nov 17</u>	SEE NO
<u>by Atty Harrington</u>		15-7477
		7477
		7480
		7478
		7477
Page# <u>17</u>	Defendant <u>Not In</u> / In Court - <u>Harrington</u>	
	Atty <u>Present</u>	
Footage <u>12.55 ADA</u>	<u>NOCC</u>	
	<u>APO Connor</u>	
Defendant Files Motion To Advance & Continue by Agreement		
<u>Cont to December 22</u>		
<u>Rm 17 Arraignment go</u>		
<u>Crime 8</u>		
<u>DEC 22 2015</u>		
<u>12-22-15 John E. Ryan Atty. Clerk</u>		
<u>DIC Atty. Harrington for def. Lt. Det. Hamilton pres</u>		
<u>Withdrawn at the request of Lt. Det. Hamilton</u>		
<u>R Atty Det Chu</u>		
<u>12/22/15 See record on 15-7480 DJH</u>		

APPLICATION FOR CRIMINAL COMPLAINT		APPLICATION NO. (COURT USE ONLY)	PAGE 1 of 2	Trial Court of Massachusetts District Court Department Boston Municipal Court 24 New Chardon Street Boston, Ma 02114	
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<input type="checkbox"/> WARRANT is requested because prosecutor represents that accused may not appear unless arrested					
INFORMATION ABOUT ACCUSED					
NAME (FIRST MI LAST) AND ADDRESS Robert A. Dwan <div style="background-color: black; width: 150px; height: 30px; margin-top: 5px;"></div>			BIRTH DATE		SOCIAL SECURITY NUMBER
			PCF NUMBER		MARITAL STATUS Married
			DRIVERS LICENSE NUMBER		STATE Ma.
			GENDER M	HEIGHT 5' 03"	WEIGHT 160
HAIR Brown	RACE W/N	COMPLEXION Light	SCARS/MARKS/TATTOOS		BIRTH STATE OR COUNTRY Massachusetts
EMPLOYER/SCHOOL City Of Boston		MOTHER'S MAIDEN NAME (FIRST MI LAST)		FATHER'S NAME (FIRST MI LAST)	
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COMPLAINANT NAME (FIRST MI LAST) Lt Detective Christopher Hamilton			COMPLAINANT TYPE <input checked="" type="checkbox"/> POLICE <input type="checkbox"/> CITIZEN <input type="checkbox"/> OTHER		PD BOSTON
ADDRESS 1 Schroeder Plaza Boston, Ma. 02120			PLACE OF OFFENSE 650 Harrison Ave, Boston, Ma.		
			INCIDENT REPORT NO. 152091273		OBTN
			CITATION NO(S).		
1	OFFENSE CODE C266, S30	DESCRIPTION Larceny Over \$250.00			OFFENSE DATE 5/5/2015
VARIABLES (e.g. victim name, controlled substances, type and value of property, other variable information: see Complaint Language Manual) City Of Boston, Three Hundred Sixty Eight Dollars					
2	OFFENSE CODE	DESCRIPTION			OFFENSE DATE
VARIABLES					
3	OFFENSE CODE	DESCRIPTION			OFFENSE DATE
VARIABLES					
REMARKS			COMPLAINANT'S SIGNATURE 		DATE FILED 11/04/2015
COURT USE ONLY			DATE OF HEARING		COURT USE ONLY
A HEARING UPON THIS COMPLAINT APPLICATION WILL BE HELD AT THE ABOVE COURT ADDRESS ON			AT		
PROCESSING OF NON-ARREST APPLICATION (COURT USE ONLY)					
DATE	NOTICE SENT OF CLERK'S HEARING SCHEDULED ON:				CLERK/JUDGE
	NOTICE SENT OF JUDGE'S HEARING SCHEDULED ON:				
	HEARING CONTINUED TO:				
	APPLICATION DECIDED WITHOUT NOTICE TO ACCUSED BECAUSE: <input type="checkbox"/> IMMINENT THREAT OF <input type="checkbox"/> BODILY INJURY <input type="checkbox"/> CRIME <input type="checkbox"/> FLIGHT BY ACCUSED <input type="checkbox"/> FELONY CHARGED AND POLICE DO NOT REQUEST NOTICE <input type="checkbox"/> FELONY CHARGED BY CIVILIAN: NO NOTICE AT CLERK'S DISCRETION.				
COMPLAINT TO ISSUE					
DATE	COMPLAINT DENIED				CLERK/JUDGE
NOV 4 2015	<input type="checkbox"/> PROBABLE CAUSE FOUND FOR ABOVE OFFENSE(S) NO(S), <input type="checkbox"/> 1. <input type="checkbox"/> 2. <input type="checkbox"/> 3. BASED ON <input type="checkbox"/> FACTS SET FORTH IN ATTACHED STATEMENT(S) <input type="checkbox"/> TESTIMONY RECORDED: TAPE NO. _____ START NO. _____ END NO. _____ <input type="checkbox"/> WARRANT <input type="checkbox"/> SUMMONS TO ISSUE ARRAIGNMENT DATE:				
	<input type="checkbox"/> NO PROBABLE CAUSE FOUND <input type="checkbox"/> REQUEST OF COMPLAINANT <input type="checkbox"/> FAILURE TO PROSECUTE <input type="checkbox"/> ON AGREEMENT OF BOTH PARTIES <input type="checkbox"/> OTHER:				
	COMMENT:				

Doc *OFFICER MARTIN APPROVES THIS* *MARTIN LUCAS*
ALLOWED 5-DEC 4 2015 *ANTHONY*

STATEMENT OF FACTS IN SUPPORT OF APPLICATION FOR CRIMINAL COMPLAINT	APPLICATION NO. (COURT USE ONLY)	PAGE 2 of 2	Trial Court of Massachusetts District Court Department 
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I signed alleges the following as a <input type="checkbox"/> full or <input checked="" type="checkbox"/> partial statement of the factual basis for the offense(s) for which a criminal complaint is sought	COURT DIVISION
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An investigation revealed that Robert Dwan submitted a voucher for payment for May 5, 2015 to the City of Boston in the amount of \$368 (three hundred sixty eight dollars) for hours that he did not work

(Use additional sheets if necessary)

PRINTED NAME Christopher Hamilton	SIGNATURE 	I AM A: <input checked="" type="checkbox"/> LAW ENFORCEMENT OFFICER <input type="checkbox"/> CIVILIAN COMPLAINANT OR WITNESS	DATE SIGNED 11/3/2015
--------------------------------------	--	--	--------------------------

ADDITIONAL FACTS BY CLERK-MAGISTRATE/ASST. CLERK/JUDGE BASED ON ORAL TESTIMONY			

PRINTED NAME	SIGNATURE OF CLERK-MAGISTRATE/ASST. CLERK/JUDGE 	DATE SIGNED
--------------	--	-------------

ROBERT A. DWAN
BOSTON MUNICIPAL COURT-CENTRAL DIVISION

DOCKET ENTRIES

Legal Counsel Fee Assessment

Legal Counsel Fee Contribution

Victim/Witness Fund Assessment

Drug Analysis Fund Assessment

Supervised Probation Fee

NOV 04 2015.

SUMMONS TO ISSUE

DEC - 1 2015

RETURNABLE Dec 4 pm 17

ATTORNEY

HARRINGTON

BAIL ON

Page# 17

Defendant

Not In Court

HARRINGTON, ROBERT A.

Footage 12:55

ADA

Nucci

APP. CONNOR

SEE NC

15-748

747

7476

7477

7478

Defendant Files Motion To Advance & Continue for Arraignment

Cont to December 22

Rm 17 Arraignment

8:00pm
Crim 8

DEC 22 2015

12-22-15 John E. Ryan Prob. Clerk


DIC. Atty. Harrington for def. Lt. Det. Hamilton pres

withdrawn at the request of Lt. Det. Hamilton

R. Det. Clark

12/22/15 See record on 15-7480

JTH

APPLICATION FOR CRIMINAL COMPLAINT		APPLICATION NO. (COURT USE ONLY)		PAGE 1 of 2		Trial Court of Massachusetts District Court Department Boston Municipal Court 24 New Chardon Street Boston, Ma. 02114		
<p>I, the undersigned complainant, request that a criminal complaint issue against the accused charging the offense(s) listed below. If the accused HAS NOT BEEN ARRESTED and the charges involve:</p> <p><input type="checkbox"/> ONLY MISDEMEANOR(S), I request a hearing <input type="checkbox"/> WITHOUT NOTICE because of an imminent threat of <input type="checkbox"/> BODILY INJURY <input type="checkbox"/> COMMISSION OF A CRIME <input type="checkbox"/> FLIGHT <input type="checkbox"/> WITH NOTICE to accused. <input checked="" type="checkbox"/> ONE OR MORE FELONIES, I request a hearing <input checked="" type="checkbox"/> WITHOUT NOTICE <input type="checkbox"/> WITH NOTICE to accused.</p> <p><input type="checkbox"/> WARRANT is requested because prosecutor represents that accused may not appear unless arrested</p>						ARREST STATUS OF ACCUSED <input type="checkbox"/> HAS <input checked="" type="checkbox"/> HAS NOT been arrested		
INFORMATION ABOUT ACCUSED								
NAME (FIRST MI LAST) AND ADDRESS Robert A. Dwan [REDACTED]				BIRTH DATE [REDACTED]		SOCIAL SECURITY NUMBER [REDACTED]		
				PCF NUMBER		MARITAL STATUS Married		
				DRIVERS LICENSE NUMBER [REDACTED]		STATE Ma		
				GENDER M	HEIGHT 5' 03"	WEIGHT 160	EYES Blue	
HAIR Brown	RACE W/N	COMPLEXION Light	SCARS/MARKS/TATTOOS		BIRTH STATE OR COUNTRY Massachusetts		DAY PHONE	
EMPLOYER/SCHOOL City Of Boston		MOTHER'S MAIDEN NAME (FIRST MI LAST) [REDACTED]			FATHER'S NAME (FIRST MI LAST) [REDACTED]			
CASE INFORMATION								
COMPLAINANT NAME (FIRST MI LAST) Lt. Detective Christopher Hamilton				COMPLAINANT TYPE <input checked="" type="checkbox"/> POLICE <input type="checkbox"/> CITIZEN <input type="checkbox"/> OTHER		PD BOSTON		
ADDRESS 1 Schroeder Plaza Boston, Ma 02120				PLACE OF OFFENSE 650 Harrison Ave, Boston, Ma.				
				INCIDENT REPORT NO. 152091272		OBTN		
				CITATION NO(S).				
OFFENSE CODE C266, S30		DESCRIPTION Larceny By Scheme				OFFENSE DATE 3/17/2015		
1		VARIABLES (e.g. victim name, controlled substances, type and value of property, other variable information: see Complaint Language Manual) City Of Boston , Forty Seven Hundred Seventy Two Dollars & Seventeen Cents						
2		OFFENSE CODE				DESCRIPTION		OFFENSE DATE
2		VARIABLES						
3		OFFENSE CODE				DESCRIPTION		OFFENSE DATE
3		VARIABLES						
REMARKS				COMPLAINANT'S SIGNATURE 		DATE FILED 11/4/2015		
COURT USE ONLY →		A HEARING UPON THIS COMPLAINT APPLICATION WILL BE HELD AT THE ABOVE COURT ADDRESS ON			DATE OF HEARING AT		TIME OF HEARING COURT USE ONLY ←	
DATE		PROCESSING OF NON-ARREST APPLICATION (COURT USE ONLY)					CLERK/JUDGE	
		NOTICE SENT OF CLERK'S HEARING SCHEDULED ON:						
		NOTICE SENT OF JUDGE'S HEARING SCHEDULED ON:						
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		APPLICATION DECIDED WITHOUT NOTICE TO ACCUSED BECAUSE: <input type="checkbox"/> IMMINENT THREAT OF <input type="checkbox"/> BODILY INJURY <input type="checkbox"/> CRIME <input type="checkbox"/> FLIGHT BY ACCUSED <input type="checkbox"/> FELONY CHARGED AND POLICE DO NOT REQUEST NOTICE <input type="checkbox"/> FELONY CHARGED BY CIVILIAN: NO NOTICE AT CLERK'S DISCRETION						
DATE		COMPLAINT TO ISSUE			COMPLAINT DENIED		CLERK/JUDGE	
		<input type="checkbox"/> PROBABLE CAUSE FOUND FOR ABOVE OFFENSE(S) NO(S), <input type="checkbox"/> 1. <input type="checkbox"/> 2. <input type="checkbox"/> 3. BASED ON <input type="checkbox"/> FACTS SET FORTH IN ATTACHED STATEMENT(S) <input type="checkbox"/> TESTIMONY RECORDED: TAPE NO. _____ START NO. _____ END NO. _____ <input type="checkbox"/> WARRANT <input type="checkbox"/> SUMMONS TO ISSUE ARRAIGNMENT DATE:			<input type="checkbox"/> NO PROBABLE CAUSE FOUND <input type="checkbox"/> REQUEST OF COMPLAINANT <input type="checkbox"/> FAILURE TO PROSECUTE <input type="checkbox"/> ON AGREEMENT OF BOTH PARTIES <input type="checkbox"/> OTHER: COMMENT:			

[illegible]